



## **EXHIBIT “B”**

**SENDER: COMPLETE THIS SECTION**

- Complete items 1, 2, and 3. Also complete item 4 if Restricted Delivery is desired.
- Print your name and address on the reverse so that we can return the card to you.
- Attach this card to the back of the mailpiece, or on the front if space permits.

## 1. Article Addressed to:

Scott Kelkman  
P.O. Box 1905  
Heddsburg, CA  
95448

## 2. Article Number

(Transfer from service label)

7002 2030 0003 2560 0321

**COMPLETE THIS SECTION ON DELIVERY**

## A. Signature

X *Skellern*

- ☐
- Agent
- 
- ☐
- Addressee

## B. Received by (Printed Name)

## C. Date of Delivery

4-7-03

D. Is delivery address different from item 1? ☐ YesIf YES, enter delivery address below: ☐ No

## 3. Service Type

- ☒
- Certified Mail
- ☐
- Express Mail
- 
- ☐
- Registered
- ☐
- Return Receipt for Merchandise
- 
- ☐
- Insured Mail
- ☐
- C.O.D.

## 4. Restricted Delivery? (Extra Fee)

☐ Yes



UNITED STATES POSTAL SERVICE



First-Class Mail  
Postage & Fees Paid  
USPS  
Permit No. G-10

• Sender: Please print your name, address, and ZIP+4 in this box •

JAY HENDRICKSON  
250 A Bel Marin Keys Blvd  
Novato, CA 94949

1349+5727

